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| APPLICATION NO.     |      | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.     | CONFIRMATION NO. |
|---------------------|------|-------------|----------------------|-------------------------|------------------|
| 09/480,641          |      | 01/11/2000  | Tom Steidel          | RR-391-PCT/US-CON       | 4559             |
| 20427               | 7590 | 05/17/2005  |                      | EXAMINER                |                  |
| RODMAN<br>7 SOUTH F |      |             | KASSA, YOSEF         |                         |                  |
| WHITE PL            |      |             | ART UNIT             | PAPER NUMBER            |                  |
|                     |      |             |                      | 2625                    |                  |
|                     |      |             |                      | DATE MAILED: 05/17/2005 |                  |

Please find below and/or attached an Office communication concerning this application or proceeding.



|                                                                                                                                                                                                                                                                                                                                                                                       | Application No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Applicant(s)                                                                   |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|--|--|--|
| Notice of Abandonment                                                                                                                                                                                                                                                                                                                                                                 | 09/480,641                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | STEIDEL ET AL.                                                                 |  |  |  |
| Notice of Abandonment                                                                                                                                                                                                                                                                                                                                                                 | Examiner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Art Unit                                                                       |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                       | YOSEF KASSA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2625                                                                           |  |  |  |
| The MAILING DATE of this communication app                                                                                                                                                                                                                                                                                                                                            | <del></del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u> </u>                                                                       |  |  |  |
| This application is abandoned in view of:                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                |  |  |  |
| <ol> <li>Applicant's failure to timely file a proper reply to the Offic         <ul> <li>(a)  A reply was received on (with a Certificate of N period for reply (including a total extension of time of</li> <li>(b)  A proposed reply was received on, but it does</li> </ul> </li> </ol>                                                                                            | Mailing or Transmission dated<br>month(s)) which expired on _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ·                                                                              |  |  |  |
| (A proper reply under 37 CFR 1.113 to a final rejectio application in condition for allowance; (2) a timely filed Continued Examination (RCE) in compliance with 37                                                                                                                                                                                                                   | n consists only of: (1) a timely filed ard Notice of Appeal (with appeal fee);                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | mendment which places the                                                      |  |  |  |
| (c) A reply was received on but it does not constitutional rejection. See 37 CFR 1.85(a) and 1.111. (See                                                                                                                                                                                                                                                                              | ute a proper reply, or a bona fide atte explanation in box 7 below).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | empt at a proper reply, to the non-                                            |  |  |  |
| (d) 🛮 No reply has been received.                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                |  |  |  |
| <ul> <li>2. Applicant's failure to timely pay the required issue fee and from the mailing date of the Notice of Allowance (PTOL-8 (a)  The issue fee and publication fee, if applicable, was), which is after the expiration of the statutory p Allowance (PTOL-85).</li> <li>(b) The submitted fee of is insufficient. A balance The issue fee required by 37 CFR 1.18 is</li> </ul> | B5).  s received on (with a Certificate in the issue fee (and th | ate of Mailing or Transmission dated and publication fee) set in the Notice of |  |  |  |
| (c) $\square$ The issue fee and publication fee, if applicable, has n                                                                                                                                                                                                                                                                                                                 | ot been received.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                |  |  |  |
| Applicant's failure to timely file corrected drawings as requal Allowability (PTO-37).      (a) ☐ Proposed corrected drawings were received on                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                |  |  |  |
| after the expiration of the period for reply.                                                                                                                                                                                                                                                                                                                                         | (a) Proposed corrected drawings were received on (with a Certificate of Mailing or Transmission dated), which is after the expiration of the period for reply.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                |  |  |  |
| (b) ☐ No corrected drawings have been received.                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                |  |  |  |
| <ol> <li>The letter of express abandonment which is signed by the<br/>the applicants.</li> </ol>                                                                                                                                                                                                                                                                                      | e attorney or agent of record, the ass                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ignee of the entire interest, or all of                                        |  |  |  |
| <ol> <li>The letter of express abandonment which is signed by ar<br/>1.34(a)) upon the filing of a continuing application.</li> </ol>                                                                                                                                                                                                                                                 | n attorney or agent (acting in a repres                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | sentative capacity under 37 CFR                                                |  |  |  |
| 6. The decision by the Board of Patent Appeals and Interfer of the decision has expired and there are no allowed claim                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | se the period for seeking court review                                         |  |  |  |
| 7. 🔀 The reason(s) below:                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                |  |  |  |
| Abandonment of this aplication is discussed with Cl                                                                                                                                                                                                                                                                                                                                   | harles Rodman on may 12, 2005.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                       | BHAVESI<br>SUPERVISORY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | H M. MEHTA PATENT EXAMINER                                                     |  |  |  |
| Petitions to revive under 37 CFR 1.137(a) or (b), or requests to withdra<br>minimize any negative effects on patent term.                                                                                                                                                                                                                                                             | aw the holding of abandonment under 370                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | CFRENTER 2000 be promptly filed to                                             |  |  |  |

U.S. Patent and Trademark Office PTOL-1432 (Rev. 04-01)